PE CONTRIBE UNIT

HINTER UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Jonathan Stanley Harold Denyer

Docket:

102199-101

Anthony Dyche

Serial No.:

09/781,61/9 /0

Art Unit:

3761

Filed:

February 12, 2001

Examiner:

Mendoza, M.

Assignee:

Medic-Aid Limited

Title:

IMPROVEMENT IN AND RELATING TO DRUG DELIVERY

APPARATUS

Certificate of Mailing

Date of Deposit February 13, 2003

I hereby certify under 37 CFR 1.8(a) that this correspondence (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service as first class mail with sufficient postage on the date indicated above and is addressed to Commissioner for Patents, U.S. Patent and Trademark Office, Washington, DC 20231.

Signed:

Name: William A. Simons

AMENDMENT TRANSMITTAL LETTER

RECEIVED

FEB 2 8 2003

TECHNOLOGY CENTER R3700

Commissioner for Patents
U.S. Patent and Trademark Office
Washington, DC 20231

Dear Sir:

Transmitted herewith is an amendment in the above-identified application. The fees have been calculated as shown below:

1. Small Entity Status

Applicant claims small entity status.

2. Claim Fees

	Claims Remaining After Amendment	Minus	Highest Number Previously paid for	No. of extra claims present	Rate	Additional Fee
Total Claims		- 20		-20	\$18.00	
Independent Claims		-3		-3	\$84.00	
Multiple Dependent Claims (if any)				0	\$280.00	
SUBTOTAL					"	\$0.00
REDUCT	ION FOR SMAI	LL ENTIT	Y BY 50%			
TOTAL		· <u></u>				\$0.00

No additional claim fees are required.

3. Extension of Time

Applicant requests under the provisions of 37 CFR 1.136 (a) to extend the Period for filing a response in the above-identified application. The requested extension and appropriate non-small-entity fee are as follows:

Requested	Fee	Small-Entity
Extension		Fee
One month	\$110.00	\$55.00
M Two months	\$400.00	\$200.00
Three months	\$920.00	\$460.00
Four months	\$1440.00	\$720.00
Five months	\$1960.00	\$980.00
Extension Fee Total		\$400.00

4. Terminal Disclaimer

	A Terminal Disclaimer is attached for which the appropriate fee is: Non Small-Entity \$110.00 Small Entity \$55.00
5.	The following additional items are enclosed: Small Entity Statement Other:

6. Payment of Fees

The total of fees due under Sections 1-4, above, is \$400.00.

\boxtimes	Please charge any additional fees or credit overpayment to Deposit Account No. 23-1665.
	Please charge \$400.00. to Deposit Account No. 23-1665. Two additional copies of this transmittal are enclosed.
	A check in amount of the total of fees due is attached.

Respectfully submitted,

Jonathan Stanley Harold Denyer, et al.

Date: February 13, 2003 WIGGIN & DANA LLP One Century Tower New Haven, CT 06508-1832

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